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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application No.	09/886,529
Filing Date	June 20, 2001
First Named Inventor	Safa Almalki
Art Unit	2666
Examiner Name	Maleanie Jagannathan
Attorney Docket Number	81862P212

ENCLOSURES (check all that apply)								
Fee Transmittal	Form	Drawing(s)	After Allowance Communication to Group					
Fee Attac	ched	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences					
Amendment / Re	esponse	Petition	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Fina Affidavits	al /declaration(s)	Petition to Convert a Provisional Application	Proprietary Information					
Extension of Tim	ne Request	Power of Attorney, Revocation Change of Correspondence Address	Status Letter					
Express Abando	onment Request	Terminal Disclaimer	Other Enclosure(s) (please identify below):					
Information Disc	closure Statement	Request for Refund	Return postcard.					
PTO/SB/0	08	CD, Number of CD(s)						
Certified Copy of Priority Document(s)								
Response to Mis	ssing Parts/ lication	Remedia						
Basic	Filing Fee	Remarks						
Decla	aration/POA	,						
Response Parts und 1.52 or 1.	e to Missing er 37 CFR 53							
•	SIGNATUR	OF APPLICANT, ATTORNEY, OR AGI	ENT					
Firm or	Kevin G. Shao,	Reg. No. 45,095						
Individual name	BLAKELY, S	OKOLOFF, TAYLOR & ZAFMA	AN LLP					
Signature	Signature							
Date 6/10/2005								
CERTIFICATE OF MAILING/TRANSMISSION								
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.								
Typed or printed na	me Carla Vignol							
Signature		Da	ate 6000					

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## FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 450.00

Complete if Known				
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Attorney Docket No.	81862P212			

## METHOD OF PAYMENT (check all that apply) □ Check □ Credit card □ Money Order □ None Other (please identify): Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee ☐ Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. **FEE CALCULATION** 1. EXTRA CLAIM FEES Fee from below Extra Fee Paid **Total Claims** 33\* 50.00 \$0.00 0 Independent Claims 200.00 \$0.00 Multiple Dependent

Large Entity   Small Entity			Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		
1202	50	2202	25	Claims in excess of 20		
1201	200	2201	100	Independent claims in excess of 3		
1203	360	2203	180	Multiple Dependent claim, if not paid		
1204	300	2204	150	**Reissue independent claims over original patent		
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent		
		ı	SUI	BTOTAL (1) (\$) 0.00		

\*\*or number previously paid, if greater, For Reissues, see below

## 2. ADDITIONAL FEES Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.		
2053	130	2053	130	Non-English specification		i
1251	120	2251	60	Extension for reply within first month		
1252	450	2252	225	Extension for reply within second month		450.00
1253	1,020	2253	510	Extension for reply within third month		
1254	1,590	2254	795	Extension for reply within fourth month		
1255	2,160	2255	1,080	Extension for reply within fifth month		
1401	500	2401	250	Notice of Appeal		
1402	500	2402	250	Filing a brief in support of an appeal		
1403	1,000	2403	500	Request for oral hearing		
1451	1,510	2451	1,510	Petition to institute a public use proceeding		
1460	130	2460	130	Petitions to the Commissioner		
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))		
Other fee	(specify)					
				SUBTOTAL (2)	(\$)	450.00

SUBMITTED BY Complete (if applicable)							
Name (Print/Type)	Kevin G. Shao	Registration No. (Attorney/Agent)	45,095	Telephone (408) 720-8300			
Signature	X = 5		-	Date	6/10/2005		